Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF INDIANA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ure identification (for	Jayceon First name	First name
		mple, your driver's	Mykell	
	licer	ise or passport).	Middle name	Middle name
		g your picture	Taylor	
identification to your meeting with the trustee.		ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
	maio assu	de your married or den names and any umed, trade names and og business as names.	Janeicia Nichelle Taylor	
	any such parti	NOT list the name of separate legal entity n as a corporation, nership, or LLC that is filing this petition.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer attification number	xxx-xx-8009	

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Your Employer Identification Number (EIN), if any.			
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		10315 Petersburg Road Evansville, IN 47725	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Vanderburgh	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Jayceon Mykell Taylor

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Debtor 1 Jayceon Mykell Taylor Case number (if known)

• The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	choosing to file under	■ Chap	,,	go to the top of page	or and oneon the appropriat	o box.			
		☐ Chap							
		☐ Chap							
		☐ Chap							
		ш Спар	lei 13						
	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
		☐ I re but app	equest the is not reco	at my fee be waived uired to, waive your f ur family size and you	(You may request this option ee, and may do so only if your are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line than installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
).	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
 .	Do you rent your	□ No.	Go to	ine 12.					
	residence?	Yes.	Has y	our landlord obtained	an eviction judgment agains	st you?			
				No. Go to line 12.					
						Judgment Against You (Form 101A) and file it with this			

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Deb	ebtor 1 Jayceon Mykell Taylor				Case number (if known)		
Por	t 3: Report About Any Bu	ucinacas	Vau Ow	n ac a Sala Branziat	~~		
	Are you a sole proprietor of any full- or part-time	■ No.		Part 4.	UI		
	business?	Пусс	Nam	e and location of busi	noss		
	A sole proprietorship is a	☐ Yes.	INAIII	e and location of busi	11655		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Nam	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Num	ber, Street, City, State	e & ZIP Code		
	it to this petition.		Chec	ck the appropriate box	a to describe your business:		
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small</i> business debtor, see 11	proceed under Subchapter V so that it can set appropriate deadlines. If you you are choosing to proceed under Subchapter V, you must attach your most cash-flow statement, and federal income tax return or if any of these documes § 1116(1)(B). I am not filing under Chapter 11.			court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11. 1, but I am NOT a small business debtor according to the definition in the Bankruptcy		
	U.S.C. § 101(51D).	☐ Yes.		filing under Chapter 1	1, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.		
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.		
Par	t 4: Report if You Own or	· Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
public I Or do y propert	public health or safety? Or do you own any property that needs immediate attention?			diate attention is l, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where	is the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1 Jayceon Mykell Taylor

. . .

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Jayceon Mykell Ta	aylor		Case num	nber (if known)	10/03/23 4:14PM
Par		-	eporting Purposes			
	What kind of debts do you have?	16a.	Are your debts primarily cons	sumer debts? Consumer debts are d al, family, or household purpose."	lefined in 11 U.S.C. § 101(8) as	"incurred by an
			☐ No. Go to line 16b.	, , , , ,		
			Yes. Go to line 17.			
		16b.		ness debts? Business debts are debted ment or through the operation of the b		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe	that are not consumer debts or busir	ness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be availa	you estimate that after any exempt pr able to distribute to unsecured credito		strative expenses
	are paid that funds will be available for		■ No □ Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000	
		☐ 100-19 ☐ 200-99	•	□ 10,001-25,000	☐ More than100,000	
19.	How much do you	\$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1	billion
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$ □ \$10,000,000,001 - \$	
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$100 million	☐ More than \$50 billion	
20.	How much do you estimate your liabilities	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1	
	to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$ □ \$10,000,000,001 -	
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billi	
Par	t 7: Sign Below					
For	you	I have ex	amined this petition, and I declar	re under penalty of perjury that the info	ormation provided is true and c	orrect.
				am aware that I may proceed, if eligib of available under each chapter, and I		
				pay or agree to pay someone who is notice required by 11 U.S.C. § 342(b).		ut this
		I request	relief in accordance with the cha	pter of title 11, United States Code, s	pecified in this petition.	
		bankrupto and 3571	cy case can result in fines up to \$	oncealing property, or obtaining mone \$250,000, or imprisonment for up to 2	y or property by fraud in conne 0 years, or both. 18 U.S.C. §§	ction with a 152, 1341, 1519,
		Jayceor	eon Mykell Taylor n Mykell Taylor of Debtor 1	Signature of Deb	otor 2	
		Executed	on October 3, 2023 MM / DD / YYYY	Executed on	ИМ / DD / YYYY	

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Debtor 1 Jayceon Mykell Taylor Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kevin Kir	nkade	Date	October 3, 2023
Signature of A	ttorney for Debtor		MM / DD / YYYY
Kevin Kinka	de 17733-82		
Printed name			
Kinkade & A	Associates, P.C.		
Firm name			
123 NW 4th	Street		
Suite 201			
Evansville, I	N 47708-1709		
Number, Street, Cit	y, State & ZIP Code		
Contact phone	812-434-4909	Email address	kinkadeassociates@hotmail.com
17733-82 IN			
Bar number & State	9		

	Case	23-70730-AKM-7	Doc 1	Filed 10/03/	/23	EOD 10/03	3/23 17:	28:48	Pg 8	3 of 67 10/03/23 4:14PM
Fill	in this inform	ation to identify your ca	se:							
Del	otor 1	Jayceon Mykell Tay								
	otor 2 ouse if, filing)	First Name	Middle Name		st Name					
Uni	ted States Ban	kruptcy Court for the:	SOUTHERN DI	STRICT OF INDIAN	NΑ					
	se number							Г	1 Check	c if this is an
								_	_	ded filing
Su Be a info you	mmary of as complete as rmation. Fill or original form	f Your Assets and accurate as possible. ut all of your schedules as, you must fill out a new contract.	If two married first; then com	people are filing to	together	, both are equ	ally respons	sible for	supplyir	
Pai	t 1: Summa	rize Your Assets								
									Your a	ssets of what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official Form 55, Total real estate, from	n 106A/B) n Schedule A/B.						\$	0.00
	1b. Copy line	62, Total personal proper	ty, from Schedu	ıle A/B					\$	27,750.00
	1c. Copy line	63, Total of all property o	n Schedule A/B						\$	27,750.00
Pai	t 2: Summa	rize Your Liabilities								
										abilities t you owe
2.		Creditors Who Have Clain total you listed in Column					1 of Schedu	le D	\$	28,728.00
3.		F: Creditors Who Have Un e total claims from Part 1 (chedule E/F			\$	0.00
	3b. Copy the	e total claims from Part 2 (nonpriority unse	ecured claims) from	line 6j o	f Schedule E/F.			\$	67,598.23
						Yo	our total liab	oilities \$		96,326.23
Pai	t 3: Summa	rize Your Income and Ex	kpenses							
4.		Your Income (Official Form ombined monthly income for the following the following following the following		chedule I					\$	4,242.84
5.	Schedule J.	Your Expenses (Official Fo	orm 106J)							

4,233.93 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

10/03/23 4:14PM

Debtor 1 Jayceon Mykell Taylor Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,368.55

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	500.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	500.00

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					10/03/23 4:14
Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Jayceon Mykell	Taylor			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA		
Case number _					☐ Check if this is an
					amended filing
Official Ea	rm 106A/B				
Schedul	le A/B: Prop	perty			12/15
In each category, s	separately list and describ	pe items. List an asset only o	once. If an asset fits in more than o	ne category, list the asset in	the category where you
	e space is needed, attach		ed people are filing together, both a m. On the top of any additional pag		
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate	e You Own or Have an Interest In		
1. Do you own or	have any legal or equitab	le interest in any residence,	building, land, or similar property?		
■ No. Go to Pa	rt 2.				
☐ Yes. Where i	is the property?				
Part 2: Describe	Your Vehicles				
3. Cars, vans, tr □ No ■ Yes	ucks, tractors, sport u	tility vehicles, motorcycl	es		
3.1 Make:	Jeep	Who has an inte	rest in the property? Check one		laims or exemptions. Put
_	Grand Cherokee		and property a check one	-	ed claims on Schedule D: ims Secured by Property.
	2015	■ Debtor 1 only ■ Debtor 2 only			
Approxima		8000 Debtor 1 and I	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other infor			the debtors and another		, ,
VIN 1c4r	jftxfc607000		and destroy and another		
	sed on 4/23 purchas	Check if this (see instructions	is community property	\$25,400.00	\$25,400.00
Examples: Boa No Yes Add the dolla pages you ha Part 3: Describe	ats, trailers, motors, pers ar value of the portion ave attached for Part 2 Your Personal and Hous	sonal watercraft, fishing ver you own for all of your e Write that number here	nal vehicles, other vehicles, and seels, snowmobiles, motorcycle and native from Part 2, including an e following items?	y entries for	\$25,400.00 Current value of the portion you own?
					Do not deduct secured

10/03/23 4:14PM Debtor 1 Jayceon Mykell Taylor Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... bed, night stand, sectional couch, linens, kitchenware, cookware, \$1,000.00 kitchen accessories, table w/chairs 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$400.00 2 game consoles & 5 video games TV (NPMSI) \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... \$150.00 Large Tent & free weights 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... used clothing \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... 2 dogs \$100.00

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Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No

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30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

□ No

Yes. Name the insurance company of each policy and list its value.

Company name:

Surrender or refund

value:

Life Insurance on Debtor through **Debtor's employer**

Mother

\$0.00

Beneficiary:

Case 23-70730-AKM-7 Doc 1 Filed 10/03/23 EOD 10/03/23 17:28:48 10/03/23 4:14PM Debtor 1 Jayceon Mykell Taylor Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$450.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

10/03/23 4:14PM Debtor 1 Case number (if known) **Jayceon Mykell Taylor** Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$25,400.00 57. Part 3: Total personal and household items, line 15 \$1,900.00 58. Part 4: Total financial assets, line 36 \$450.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$27,750.00 Copy personal property total 62. \$27,750.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$27,750.00

Official Form 106A/B Schedule A/B: Property page 6

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10/0	3/23	1.1	4PM

Debtor 1	Jayceon Mykell T	aylor		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
bed, night stand, sectional couch, linens, kitchenware, cookware,	\$1,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2)
kitchen accessories, table w/chairs Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
2 game consoles & 5 video games Line from Schedule A/B: 7.1	\$400.00		\$400.00	Ind. Code § 34-55-10-2(c)(2)
Line Holli Schedule Arb. 1.1			100% of fair market value, up to any applicable statutory limit	
TV (NPMSI) Line from Schedule A/B: 7.2	\$150.00		\$150.00	Ind. Code § 34-55-10-2(c)(2)
Elle Holli Genedale 74 b. F.2			100% of fair market value, up to any applicable statutory limit	
Large Tent & free weights Line from Schedule A/B: 9.1	\$150.00		\$150.00	Ind. Code § 34-55-10-2(c)(2)
Line Holli Galledale A.D. G.1			100% of fair market value, up to any applicable statutory limit	
used clothing Line from Schedule A/B: 11.1	\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(2)
Line Ironi Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	

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10/03/23 4:14PM

Deb	otor 1 Jayceon Mykell Taylor			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2 dogs Line from Schedule A/B: 13.1	\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(2)
	Line Holli Schedule A/B. 13.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$0.25		\$0.25	Ind. Code § 34-55-10-2(c)(3)
	Line from Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Individual Checking Account: Heritage Federal Credit Union	\$22.81		\$22.81	Ind. Code § 34-55-10-2(c)(3)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Individual Savings Account: Heritage Federal Credit Union	\$6.93		\$6.93	Ind. Code § 34-55-10-2(c)(3)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Federal and State: 2023 Tax refund Line from Schedule A/B: 28.1	\$420.01		\$420.01	Ind. Code § 34-55-10-2(c)(3)
	Line from Schedule A/b. 20.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	years after that for ca	ases fi	,	,

	23-70730-AKN		OD 10/03/23 1	7:28:48 Pg 18	3 OI
Fill in this inforn	nation to identify you	r case:			
Debtor 1	Jayceon Mykell	Taylor			
	First Name	Middle Name Last Name		-	
Debtor 2				_	
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT OF INDIANA		-	
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form	_				
Schedule	D: Creditors	Who Have Claims Secure	d by Propert	У	12/15
number (if known). 1. Do any creditors No. Check	have claims secured by	nis form to the court with your other schedules. Y			me and case
	II Secured Claims				
		nore than one secured claim, list the creditor separatel	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Western F	unding	Describe the property that secures the claim:	\$27,578.00	\$25,400.00	\$2,178.00
	etrick Lane NV 89120	2015 Jeep Grand Cherokee 128000 miles VIN 1c4rjftxfc607000 value based on 4/23 purchase price As of the date you file, the claim is: Check all that apply. □ Contingent			
Number, Street,	, City, State & Zip Code	☐ Unliquidated			
Who owes the de	ebt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
☐ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	he debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cl	aim relates to a	Other (including a right to offset) Auto Loar	1		

community debt

Date debt was incurred 4/23

Last 4 digits of account number

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Debtor 1 Jayceon Mykell Taylor		Case number (if known)		
First Name Middle N	lame Last Name			
2.2 World Finance Corp.	Describe the property that secures the claim:	\$1,150.00	\$150.00	\$1,000.00
Creditor's Name	Loan secured by TV			
c/o World Acceptance				
Corp. 4313 E Morgan Ave Ste D	As of the date you file, the claim is: Check all that	 t		
Evansville, IN 47715	apply.			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, Street, Oily, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgage of	r secured		
Debtor 2 only	car loan)	Godied		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	Other (including a right to offset) NPMSI			
Date debt was incurred 10/19/22	Last 4 digits of account number			
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$28,728.00	1	
If this is the last page of your form, add	. •	\$28,728.00		
Write that number here:		\$20,720.00		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
trying to collect from you for a debt you of	oe notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors his page.	nd then list the collection agency	here. Similarly, if yo	u have more
Name, Number, Street, City, State Westlake Financial Service		which line in Part 1 did you enter the	e creditor? 2.1	
4751 Wilshire Blvd Ste 10	•	st 4 digits of account number		
Los Angeles, CA 90010		<u></u>		
[] , , , , , , , , , , , , , , , , , , ,				
Name, Number, Street, City, State World Finance Corporation		which line in Part 1 did you enter the	e creditor? 2.2	
c/o World Acceptance Co		st 4 digits of account number		
PO Box 6429	•	3 • • • • • • • • • • • • • • • • • • •		
Greenville, SC 29606-6429				

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Fill in this inform	nation to identify your case:						
Debtor 1							
Debior 1	Jayceon Mykell Taylor First Name Mi	ddle Name Last Nam	e				
Debtor 2							
(Spouse if, filing)	First Name Mi	ddle Name Last Nam	е				
United States Bar	nkruptcy Court for the: SOUTH	HERN DISTRICT OF INDIANA					
Case number							
(if known)						Check	if this is an
						amend	ed filing
Official Form	106F/F						
		ave Unsecured Claim	c				12/15
	Es Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIANA ST Corm 106E/F Be E/F: Creditors Who Have Unsecured Claims te and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to contracts or unexpired leases that could result in a claim. Also list executory contracts or One-bedue ArB: Property Official Form 1066. Do not include any creditors with partially secured claims. List the other party to reach claim Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your en number (if known). It als tall of Your PRIORITY Unsecured Claims reditors have priority unsecured claims against you? To to Part 2. If your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, hat type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority unsecured claims, fill out the Continuation Page of more than one creditor holds a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular claim, list the other creditors in Part 3. It also be a particular priority amounts. It also be a particular priority amount						
eft. Attach the Con	tinuation Page to this page. If you I						
Part 1: List Al	I of Your PRIORITY Unsecured	Claims					
1. Do any credito	rs have priority unsecured claims a	against you?					
☐ No. Go to Pa	art 2.						
Yes.							
identify what typ possible, list the	pe of claim it is. If a claim has both price claims in alphabetical order according	ority and nonpriority amounts, list that og to the creditor's name. If you have n	claim here a	and show both priority a	nd nonprior	ity amoun	ts. As much as
	•		booklet.)				
(1 2 7 7	7,		,	Total claim	•		
		Last 4 digits of account number		\$0.00		\$0.00	\$0.00
•		When we the debt incorred?	nui nu 4 a	filing			
		when was the dept incurred:	priorit	, illing			
	·	As of the date you file, the claim	is: Check	all that apply			
_		☐ Contingent					
■ Debtor 1 o	nly	☐ Unliquidated					
Debtor 2 o	nly	☐ Disputed					
Debtor 1 a	nd Debtor 2 only	Type of PRIORITY unsecured cla	aim:				
☐ At least on	e of the debtors and another	☐ Domestic support obligations					
☐ Check if the	his claim is for a community debt	Taxes and certain other debts	ou owe the	government			
Is the claim s	subject to offset?	☐ Claims for death or personal in	jury while y	ou were intoxicated			
■ No		Other. Specify					
☐ Yes		any poten	ial State	income taxes ov	ved		

Case 23-70730-AKM-7 Doc 1 Filed 10/03/23 EOD 10/03/23 17:28:48 Pg 21 of 67 10/03/23 4:14PM Case number (if known) Debtor 1 Jayceon Mykell Taylor 2.2 Last 4 digits of account number \$0.00 **Internal Revenue Service** \$0.00 \$0.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? prior to filing Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? No Other. Specify any potential Federal income taxes owed ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2 Total claim 4.1 **ADT Security** 2407 \$1,501.26 Last 4 digits of account number Nonpriority Creditor's Name 3190 S Vaughn Way Ste 150 When was the debt incurred? prior to filing Aurora, CO 80014 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

☐ Check if this claim is for a community

Is the claim subject to offset?

☐ Student loans

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify home security service

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Debto	or 1 _Jayceon Mykell Taylor	Case number (if known)				
4.2	Bison Green	Last 4 digits of account number	\$1,000.00			
	Nonpriority Creditor's Name PO Box 528 Hays, MT 59527 Number Street City State Zip Code	When was the debt incurred? 4/3/23 As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify personal loan				
4.3	Boston IVF At The Women's Hospital	Last 4 digits of account number	\$60.00			
	Nonpriority Creditor's Name PO Box 963 Evansville, IN 47706	When was the debt incurred?prior to filing				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify medical				
4.4	Bright Lending Nonpriority Creditor's Name	Last 4 digits of account number 6104	\$5,417.22			
	PO Box 578 Hays, MT 59527	When was the debt incurred? 3/27/23				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify unsecured loan				

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Debtor	1 Jayceon Mykell Taylor	Case number (if known)	10/03/23 4.141 10
4.5	Capital One Bank USA NA	Last 4 digits of account number	\$302.00
	Nonpriority Creditor's Name 15075 Capital One Drive 2nd Floor Richmond, VA 23238	When was the debt incurred? 1/26/23	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.6	Cash Advance Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	c/o Charlie Fagan 915 Arrow Hwy Glendora, CA 91740	When was the debt incurred? prior to filing	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify any potential claim	
4.7	Check into Cash Corporate Nonpriority Creditor's Name	Last 4 digits of account number	\$900.00
	PO Box 550	When was the debt incurred? prior to filing	
	Dublin, OH 43017	As of the date year file, the plains in Check all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify cash advance	

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Last 4 digits of account number	3985	\$2,728
When was the debt incurred?	prior to filing	
when was the dept incurred:	prior to ming	
As of the date you file, the claim	is: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
Type of NONPRIORITY unsecure	d claim:	
☐ Student loans		
Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharing	ng plans, and other similar debts	
medical bil	ls	
_ Cause No.	82D01-2008-SC-003985	
Other. Specify Judgment	entered 10/30/20	
Last 4 digits of account number	0147	\$3,507.
When was the debt incurred?	prior to filing	
As of the date you file, the claim	is: Check all that apply	
•	,	
☐ Contingent		
<u> </u>		
•	d claim:	
☐ Student loans		
	aration agreement or divorce that you did not	
	og plans, and other similar debts	
_ Cause No.	82D07-2301-SC-000147	
Last 4 digits of account number	misc	\$5,436.
when was the debt incurred?	prior to filing	
As of the date you file, the claim	is: Check all that apply	
Contingent		
_		
•		
-	d claim:	
<u></u>	a signific	
_	aration agreement or divorce that you did not	
report as priority claims	aradon agreement of divorce that you did not	
☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
•		
	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin medical bil Cause No. Judgment Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin medical bil Cause No. Lawsuit - m Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims	When was the debt incurred? prior to filing As of the date you file, the claim is: Check all that apply Contingent

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Debtor	1 Jayceon Mykell Taylor	Case number (if known)	
4.1	Diamond Valley Federal Credit Union	Last 4 digits of account number	\$2,902.67
	Nonpriority Creditor's Name 840 Diamond Ave Evansville, IN 47711	When was the debt incurred? prior to filing	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify personal loan	
4.1	Echo Community Health Care Inc.	Last 4 digits of account number misc	\$528.15
	Nonpriority Creditor's Name 315 Mulberry Street Evansville, IN 47713	When was the debt incurred?prior to filing	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical bills	
4.1	Evansville Psychiatric Associates	Last 4 digits of account number	\$946.91
	Nonpriority Creditor's Name 2015 Maxwell Avenue Evansville, IN 47711	When was the debt incurred?prior to filing	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify medical	
		- ···-·· • p · · · · ,	

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Jayceon Mykell Taylor			
Evansville Radiology PC	Last 4 digits of account number	misc	\$55
Nonpriority Creditor's Name 350 W Columbia St Ste 420	When was the debt incurred?	prior to filing	
Evansville, IN 47710 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify any potential	ial claims	
Finwise/OPPLoans	Last 4 digits of account number	5945	\$2,31
Nonpriority Creditor's Name 130 E Randolph St Ste 3400 Chicago, IL 60601	When was the debt incurred?	3/8/23	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify unsecured	loan	
		4004	****
Flagship Credit Acceptance LLC Nonpriority Creditor's Name	Last 4 digits of account number	1001	\$33,781
PO Box 2070	When was the debt incurred?	11/28/22	
Coppell, TX 75019-2070	As of the data was file the element	in Oh all that and	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	іъ. Спеск ан тасарріу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	og plane, and other similar debts	
No	☐ Debts to pension or profit-sharin		
	2020 Jeep VIN: 74CN	Renegade IJABBXLPL31221	
☐ Yes	Other. Specify repossesses	ed 8/23	

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1 Jayceon Mykell Taylor		Case number (if known)	
har Took Oomaning (C. W.			AF 00
Nonpriority Creditor's Name	Last 4 digits of account number		\$500.
3501 N 1st Ave	When was the debt incurred?	prior to filing	
Evansville, IN 47710		<u> </u>	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	Contingent		
☐ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
□Yes	Other. Specify		
	tuition		
Minuteclinic Diagnostc Of Indiana	Last 4 digits of account number	misc	\$139.
Nonpriority Creditor's Name PO Box 329		prior to filing	
Woonsocket, RI 02895-0781	-		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	□ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
Yes	Other. Specify medical bi	lls	
N. A. W.		4504	•
Net Credit Nonpriority Creditor's Name	Last 4 digits of account number	1581	\$0.
175 W Jackson Blvd Ste 1000 Chicago, IL 60604	When was the debt incurred?	02/23	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-shari	• •	
☐ Yes	Other. Specify unsecured	l loan	

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Debtor	1 Jayceon Mykell Taylor	Case number (if known)					
4.2	Owensboro Health Billing	Last 4 digits of account number	\$1,909.92				
	Nonpriority Creditor's Name PO Box 20007 Owensboro, KY 42304	When was the debt incurred?	prior to filing				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	□ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify medical					
	Progressive Paloverde Insurance Co	Last 4 digits of account number	misc	\$80.77			
	Nonpriority Creditor's Name Processing Center - 27 PO Box 55126	When was the debt incurred?	prior to filing				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	□ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Insurance					
4.2	Southwest Indiana Pathologist LLC Nonpriority Creditor's Name	Last 4 digits of account number	misc	\$0.00			
	PO Box 3078 Evansville, IN 47701	When was the debt incurred?	prior to filing				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other Specify any potential claims					

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Debtor	1 Jayceon Mykell Taylor		Case number (if known)	10/03/23 4.14P1			
4.2	The Bank of Missouri	Last 4 digits of account number	9414	\$827.19			
	Nonpriority Creditor's Name PO Box 105555 Atlanta, GA 30348	When was the debt incurred?	prior to filing	_			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did no	t			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify credit card		_			
4.2	Tri-State Orthopaedics, Inc.	Last 4 digits of account number	misc	\$375.00			
	Nonpriority Creditor's Name 225 Crosslake Drive Evansville, IN 47715	When was the debt incurred?	prior to filing	_			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did no	t			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify medical bill	ls				
4.2	WGLS	Last 4 digits of account number	5558	\$2,387.71			
5	Nonpriority Creditor's Name 10600 S Pennsylvania Ave Ste	When was the debt incurred?	03/2023	Ψ2,337.71			
	16#828 Oklahoma City, OK 73170 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	7.0 0	on one an anat apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did no	t			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes						

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

10/03/23 4:14PM Case number (if known) Debtor 1 Jayceon Mykell Taylor On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Alpha Recovery Corp. Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6912 S Quentin St Unit 10 Part 2: Creditors with Nonpriority Unsecured Claims Centennial, CO 80112 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? American Profit Recovery Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 34505 W 12 Mile Rd Ste 333 ■ Part 2: Creditors with Nonpriority Unsecured Claims Farmington Hills, MI 48331 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Americollect, Inc. Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1566 ■ Part 2: Creditors with Nonpriority Unsecured Claims Manitowoc, WI 54221-1566 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Business Revenue Systems, Inc. Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Des Moines IA Division** Part 2: Creditors with Nonpriority Unsecured Claims 6032 Trier Road Fort Wayne, IN 46815 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Caine & Weiner Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 12005 Ford Rd ■ Part 2: Creditors with Nonpriority Unsecured Claims Dallas, TX 75234 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Cash Pro Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 101 Plaza East Blvd Ste 100 ■ Part 2: Creditors with Nonpriority Unsecured Claims Evansville, IN 47715 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Check Into Cash- Diamond Avenue** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 630 E. Diamond Avenue ■ Part 2: Creditors with Nonpriority Unsecured Claims Evansville, IN 47711 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Christina Hanna Esq Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 517 US Highway 31 N ■ Part 2: Creditors with Nonpriority Unsecured Claims Greenwood, IN 46142 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Collection Associates ndba RMP Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 630844 Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45263-0844 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Complete Billing Services** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 517 US Hwy 31 North Part 2: Creditors with Nonpriority Unsecured Claims Greenwood, IN 46142 Last 4 digits of account number

Line 4.1 of (Check one):

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address

Official Form 106 E/F

Credit Collection Service

Debtor 1 Jayceon Mykell Taylor	Case number (if known)
725 Canton St Ste 1 Norwood, MA 02062	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Deaconess Health System/Healthcare Resource Solutions, LLC PO Box 1230 Evansville, IN 47706-1230	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Deaconess Single Billing Deaconess Single Billing (EPIC) PO Box 1230 Evansville, IN 47706	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address EPI Finance Group, LLC 517 US Highway 31 N Greenwood, IN 46142-3932	Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Fortiva Credit Card PO Box 105341 Atlanta, GA 30348	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.23 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Galaxy International Purchasing LLC 4730 S Fort Apache Road Suite 300 Las Vegas, NV 89147	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.23 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Hoosier Accounts Service 2545 MJM Industrial Dr Evansville, IN 47715	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Hoosier Accounts Service 2545 MJM Industrial Dr Evansville, IN 47715	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Kahn, Dees, Donovan & Kahn PO Box 3646 Evansville, IN 47735-3646	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Med 1 Solutions 517 US Hwy 31 N Greenwood, IN 46142	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Med 1 Solutions 517 US Hwy 31 N Greenwood, IN 46142	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

10/03/23 4:14PM Case number (if known) Debtor 1 Jayceon Mykell Taylor **Medical & Professional Collection** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Svc. Part 2: Creditors with Nonpriority Unsecured Claims 5055 Newburgh Plaza South Newburgh, IN 47630 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Medical & Professional Collection** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5055 Newburgh Plaza South Newburgh, IN 47630 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Office Of The United States Attorney Line 2.2 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims **Southern District of Indiana** ☐ Part 2: Creditors with Nonpriority Unsecured Claims 10 West Market Street, Ste 2100 Indianapolis, IN 46204 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Portfolio Recovery Associates, LLC Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 120 Corporate Blvd Ste 100 Part 2: Creditors with Nonpriority Unsecured Claims Norfolk, VA 23502 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Professional & Business** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Collections Inc. Part 2: Creditors with Nonpriority Unsecured Claims Kahn Dees Donovan Kahn 501 Main Street Suite 305 Evansville, IN 47708 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Republic Bank Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o EPI Finance Group ■ Part 2: Creditors with Nonpriority Unsecured Claims 517 US Highway 31 North Greenwood, IN 46142 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Republic Bank & Trust Co. Line **4.19** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 950276 ■ Part 2: Creditors with Nonpriority Unsecured Claims Louisville, KY 40295-0276 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Rev 1 Solutions** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 517 US Hwy 31 N Part 2: Creditors with Nonpriority Unsecured Claims Greenwood, IN 46142 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Tate & Kirlin Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 580 Middletown Blvd Suite D240 ■ Part 2: Creditors with Nonpriority Unsecured Claims Langhorne, PA 19047 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Transworld Systems Inc Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Fdba NCO Financial Systems Inc** ■ Part 2: Creditors with Nonpriority Unsecured Claims 500 Virginia Drive Fort Washington, PA 19034 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address US Dept. of Justice/US Attorney Line 2.2 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims

General

Debtor 1 Jayceon Mykell Taylor		Case number (if known)					
950 Pennsylvania Avenue, NW Washington, DC 20530-0001		☐ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?					
WLCC Green Circle	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 75		■ Part 2: Creditors with Nonpriority Unsecured Claims					

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Part 4: Add the Amounts for Each Type of Unsecured Claim

Pine Ridge, SD 57770

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 500.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 67,098.23
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 67,598.23

Last 4 digits of account number

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10/03/23 4:14PM

Fill in this info	rmation to identify your	case:		
Debtor 1	Jayceon Mykell T	aylor		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	sankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for	
2.1	AT&T Attn: Bankruptcy Dept. 2612 N Roan St Johnson City, TN 37601-1708	Cell Phone Contract (2 years remaining)	
2.2	Real Property Management Results 1322 E Division St Evansville, IN 47711	Rental Lease	

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					· ·	10/03/23 4:14P
Fill in th	is information to identify your	case:				
Debtor 1	Jayceon Mykell T	aylor				
D = 1: 1 = :: 6	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if,		Middle Name	Last Name			
United S	tates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA			
Case nu (if known)	mber				☐ Check if the	
Offici	al Form 106H				amended	IIIIIg
Sche	dule H: Your Cod	ebtors				12/15
people a fill it out, your nan 1. D N Y 2. W Ariz	-	lally responsible for supple boxes on the left. Attach Answer every question you are filing a joint case, of July lived in a community pr Nevada, New Mexico, Pu	olying correct information the Additional Page to do not list either spouse a operty state or territory's erto Rico, Texas, Washing	en. If more space is this page. On the to s a codebtor.	needed, copy the Ado op of any Additional P	ditional Page, Pages, write
in li Fori	olumn 1, list all of your codebt ne 2 again as a codebtor only i n 106D), Schedule E/F (Official Column 2.	if that person is a guaran	tor or cosigner. Make su	ire you have listed	the creditor on Sched	lule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The concheck all schedu	reditor to whom you o	we the debt
3.1	Brittany Shelton 10315 Petersburg Road Evansville, IN 47725			☐ Schedule D, ☐ Schedule E/F ■ Schedule G Real Property	=, line	ts

Page 1 of 1 Official Form 106H Schedule H: Your Codebtors

10/03/23	

N/A

N/A

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+\$

\$

Fill	in this information to identify your c	ase:							
De	btor 1 Jayceon My	kell Taylor							
1 -	btor 2 puse, if filing)								
Un	ited States Bankruptcy Court for the	e: SOUTHERN DISTRIC	T OF IN	DIANA					
Case number (If known)						□ A		ed filing ent showing p	ostpetition chapter
\circ	fficial Form 106I					_		as of the follow	wing date:
	chedule I: Your Inc	omo				N	1M / DD/ Y	YYY	12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly th you, c	r, and your spoເ lo not include ir	use is li nformat	ving with	you, incl t your spo	ude informati ouse. If more	ion about your space is needed,
1.	Fill in your employment information.		Debto	r 1			Debtor 2	2 or non-filing	g spouse
	If you have more than one job, attach a separate page with information about additional	Employment status		■ Employed□ Not employed			☐ Employed ☐ Not employed		
	employers.	Occupation	Site Supervisor						
	Include part-time, seasonal, or self-employed work.	Employer's name	Norm	al Life, Inc.					
	Occupation may include student or homemaker, if it applies.	Employer's address	Living 414 S	esCare Comm J Fares Ave sville, IN 47714	•				
		How long employed the	here?	4 years			_		
Pa	rt 2: Give Details About Mo	nthly Income							
	imate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have	nothing to report	t for any	/ line, write	e \$0 in the	space. Includ	e your non-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine th	e information for	all emp	loyers for	that perso	on on the lines	below. If you need
						For Del	btor 1	For Debto non-filing	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	§4	,722.76	\$	N/A

Official Form 106l Schedule I: Your Income page 1

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Jayceon Mykell Taylor	_	Ca	ase number (if known)				
				F	For Debtor 1		Debtor 2		
	C	withing Albana	4	_	1 700 70		n-filing spo		
	Сор	y line 4 here	4.	,	4,722.76	\$_		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	. 9	904.66	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. 9	0.00	\$_		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	. 9	0.00	\$		N/A	
	5e.	Insurance	5e.		\$ 284.70	\$_		N/A	
	5f.	Domestic support obligations	5f.		0.00	\$_		N/A	
	5g.	Union dues	5g.		0.00	\$_		N/A	
	5h.	Other deductions. Specify: STD	_ 5h.		\$ 24.76	_		N/A	
		Hospital Insurance	_		18.00	\$_		N/A	
		Legal Plan	_		16.50	\$_		N/A	
		ID Theft Protect Supplemental Life insurance	_		7.96 6.26	\$_ \$		N/A N/A	
		Accident Insurance	_		5.82	\$ _		N/A	
		Critical Illness	_		5.20	\$-		N/A	
		AD&D	_		3.28	\$_		N/A	
		LTD	_		2.78	\$_		N/A	
6.	٨٨٨	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$		\$ \$		N/A	
						· —			
7.	Caid	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,442.84	\$_		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business,							
	oa.	profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total	0 -	,	1	•			
	O.L.	monthly net income.	8a.		0.00	\$_		N/A	
	8b.	Interest and dividends	8b.	. ;	0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.		0.00	\$_		N/A	
	8d.	Unemployment compensation	8d.		0.00	\$_		N/A	
	8e.	Social Security	8e.		0.00	\$_		N/A	
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	!						
		Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	5	\$ 0.00	\$		N/A	
	8g.	Pension or retirement income	8g.	. 9	0.00	\$_		N/A	
		Avg Mo Contribution from						NI/A	
	8h.	Other monthly income. Specify: Ex-Girlfriend	_ 8h.	.+ \$	800.00	+ \$_		N/A	
9.	Δdd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	800.00	\$		N/A	
٥.	Auu	an other medite. Add lines database outdet direction of the	٥.	Ψ.	800.00	Ψ_		IN/A	
4.0	٠.		[Δ				•	
10.		•	10. \$	\$	4,242.84 + \$		N/A =	\$	4,242.84
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							
11.		e all other regular contributions to the expenses that you list in Schedule							
		ide contributions from an unmarried partner, members of your household, your r friends or relatives.	deper	ndei	nts, your roommate	s, and			
		not include any amounts already included in lines 2-10 or amounts that are not a	availa	ble :	to pay expenses lis	ted in S	Schedule J	1.	
	Spec		a • a · a		to pay expenses no		11		0.00
	-					_			
12.		the amount in the last column of line 10 to the amount in line 11. The res							
		e that amount on the Summary of Schedules and Statistical Summary of Certai	n Liab	bilitie	es and Related Dat	a, if it	12.	\$	4,242.84
	appli	100							,
								ombine nonthly	ed income

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Debtor	1 _	Jayceon Mykell	Taylor C	Case number (if known)	
13.	o yo	ou expect an incr	ease or decrease within the year after you file this form?		
		No.			
		Yes. Explain:			

Official Form 106l Schedule I: Your Income page 3

Fill	in this informa	ation to identify yo	our case:						
Deb	tor 1	Jayceon Myl	kell Taylo	r		Ch	neck i	f this is:	
							An	amended filing	
	tor 2								ving postpetition chapter
(Spc	ouse, if filing)						13	expenses as of	the following date:
Unite	ed States Bankı	ruptcy Court for the	: SOUTH	ERN DISTRICT OF INDIA	ANA		MN	// DD / YYYY	
	e number								
(II KI	nown)								
Of	ficial Fo	rm 106J							
Sc	hedule	J: Your	Exper	292					12/1
Be a	as complete a ormation. If m nber (if know	and accurate as	s possible. eded, atta ry question	If two married people a ch another sheet to this					
1.	Is this a joir		iloiu						
	■ No. Go to		in a separa	ate household?					
	□ 100: 20 0		a copa						
	=		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate Housel	hold of D	ebtor	2.	
2.	Do you have	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state	the			Ex-Girlfriend's	Cousin	-		□ No
	dependents				FT Student			18	■ Yes
									□ No
					Ex-Girlfriend			25	Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
3.	Do your exp	oenses include		No					
	expenses o	f people other t d your depende	han 👝	Yes					
Part		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp					
Incl	ude expense	es paid for with I	non-cash	government assistance	if vou know				
the		h assistance an		luded it on Schedule I:				Your expe	enses
4.		or home owners		ses for your residence.	Include first mortgage	4.	\$_		1,105.00
	If not includ	ded in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	4b. Prope	erty, homeowner's	s, or renter	s insurance		4b.	\$		28.00
	4c. Home	maintenance, re	epair, and ι	pkeep expenses		4c.	\$ _		0.00
	4d. Home	owner's associat	tion or cond	dominium dues		4d.	\$		0.00
5	Additional r	mortgage navme	ents for vo	ur residence, such as ho	me equity loans	5	\$		0.00

Debtor 1		Jayceon Mykell Taylor				ber (if known)	
6.	Utiliti	ies:					
٥.	6a.		heat, natural gas		6a.	\$	300.00
	6b.	Water, sev	ver, garbage collection		6b.	\$	80.00
	6c.		, cell phone, Internet, satellite, and ca	able services	6c.	\$	325.00
	6d.	Other. Spe	ecify:		6d.	\$	0.00
7.	Food		ekeeping supplies			\$	575.00
8.			hildren's education costs		8.	\$	0.00
9.	Cloth	hing, laundi	ry, and dry cleaning		9.	\$	150.00
10.		•	roducts and services		10.	\$	145.00
		-	ntal expenses		11.	·	225.00
			Include gas, maintenance, bus or tra	in fare			
			ar payments.		12.	\$	250.00
13.	Ente	rtainment,	clubs, recreation, newspapers, ma	gazines, and books	13.	\$	0.00
14.	Char	itable conti	ributions and religious donations		14.	\$	0.00
15.	Insur	rance.				-	
	Do no	ot include in	surance deducted from your pay or ir	ncluded in lines 4 or 20.			
	15a.	Life insura	nce		15a.		0.00
	15b.	Health insu	urance		15b.	\$	0.00
	15c.	Vehicle ins	surance		15c.	\$	189.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay	or included in lines 4 or 20.			
	Spec	•			16.	\$	0.00
17.			ease payments:				
			ents for Vehicle 1		17a.	·	720.93
			ents for Vehicle 2		17b.	· -	0.00
		Other. Spe			17c.	·	0.00
		Other. Spe			17d.	\$	0.00
18.			of alimony, maintenance, and supp		10	¢	0.00
40			our pay on line 5, Schedule I, You		18.	· -	
19.			you make to support others who	do not live with you.	40	\$	0.00
00	Spec	,	nutry assume a sea a meat in all seal and in the sea	4 -	19.		
20.			erty expenses not included in lines on other property	4 or 5 of this form or on Schea	ui e i: Yo 20a.		0.00
		Real estate			20a. 20b.		0.00
						·	0.00
			nomeowner's, or renter's insurance		20c.	·	0.00
			ce, repair, and upkeep expenses		20d.		0.00
			er's association or condominium dues	5	20e.	·	0.00
21.		er: Specify:	Lawn Care Services		21.	· ·	100.00
		n Members	•			+\$	21.00
	Pet f	food and o	are		_	+\$	20.00
22	Calcı	ulate vour r	monthly expenses				
		Add lines 4				\$	4,233.93
			2 (monthly expenses for Debtor 2), if	any from Official Form 106.I-2		\$	4,233.33
						·	4 222 02
	22C. /	Add line 228	a and 22b. The result is your monthly	expenses.		\$	4,233.93
23.	Calc	ulate your r	nonthly net income.				
	23a.	Copy line	12 (your combined monthly income) f	rom Schedule I.	23a.	\$	4,242.84
	23b.	Copy your	monthly expenses from line 22c abo	ve.	23b.	-\$	4,233.93
			•				·
	23c.	Subtract yo	our monthly expenses from your mon	thly income.			0.04
			is your monthly net income.		23c.	\$	8.91
	_						
24.			in increase or decrease in your exp				and or do croppe has a section of a
			u expect to finish paying for your car loan terms of your mortgage?	within the year or do you expect your n	ιιοπgage	payment to increa	ase of decrease decause of a
	■ No	dification to the terms of your mortgage?					
			Evaloin horo:				
	☐ Ye	es.	Explain here:				

Fill in this infor	mation to identify your	case:			
Debtor 1	Jayceon Mykell T	avlor			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA		
Case number (if known)					☐ Check if this is an amended filing
Official Forr Declarat		n Individual	Debtor's S	Schedules	12/15
obtaining money years, or both. 1		connection with a bank			tement, concealing property, or 00, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorn	ney to help you fill o	out bankruptcy forms?	
■ No					
☐ Yes. I	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sumr	mary and schedules	filed with this declarati	ion and
X /s/.lav	ceon Mykell Taylor		X		
Jayce	on Mykell Taylor re of Debtor 1			e of Debtor 2	

Date October 3, 2023

Date ____

Fill in this infor	mation to identify you	r case:			
Debtor 1	Jayceon Mykell				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT O	F INDIANA		
Case number					
(if known)					Check if this is an
					amended filing
Official Fo				_	
Statement	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/2
		ible. If two married people a , attach a separate sheet to t			
	n). Answer every que		uns form. On the top of an	y additional pages, write yo	ui ilaille allu case
Part 1: Give	Details About Your Ma	arital Status and Where You	Lived Before		
	ur current marital statu	167			
_					
☐ Married					
■ Not ma	arried				
2. During the	last 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
Yes. Li	st all of the places you	lived in the last 3 years. Do no	ot include where you live now	I.	
Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2
1222 C D	edford Ave	lived there From-To:			lived there
	e, IN 47713	09/2019 -	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
		05/01/2022			
states and territo No Yes. M	<i>rie</i> s include Arizona, Ca	ver live with a spouse or leg alifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of ur Income	vada, New Mexico, Puerto R		
Fill in the tot If you are fili	tal amount of income yo	mployment or from operating ou received from all jobs and a have income that you receive	all businesses, including part	-time activities.	ndar years?
□ No	ill in the details.				
■ res. Fi	iii in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$25,540.43	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		Operating a business	

Debtor 1 Jayceon Mykell Taylor					Case	Case number (if known)				
				Debtor 1		Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	or last caler anuary 1 to	ndar year: December	31, 2022)	■ Wages, commissions, bonuses, tips	\$77,308.17	☐ Wages, commissions, bonuses, tips				
				☐ Operating a business		Operating a business				
		dar year be December		■ Wages, commissions, bonuses, tips	\$57,161.48	☐ Wages, commissions, bonuses, tips				
				☐ Operating a business		☐ Operating a business				
	winnings. List each No	If you are fil	ing a joint ca	pensions; rental income; interse and you have income that you have income that you ome from each source separa	you received together, list it o	nly once under Debtor 1.				
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)			
	or last caler anuary 1 to	ndar year: December	31, 2022)	Federal Income Tax Refund	\$3,438.00					
				State Income Tax Refund	\$177.00					
		dar year be December		Federal Income Tax Refund	\$4,986.00					
				State Income Tax Refund	\$177.00					
D	art 3: Lis	t Cartain Ba	vmonte Voi	ı Made Before You Filed for	Rankruntov					
6.		r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor	2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an			
		□ No.	90 days bef Go to line	ore you filed for bankruptcy, di 7.	d you pay any creditor a tota	of \$7,575* or more?				
		☐ Yes	paid that c	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the on 4/01/25 and every 3 year	nts for domestic support oblig his bankruptcy case.	ations, such as child support a	and alimony. Also, do			
		2 , 000				aato of adjaotifion	-			

Case 23-70730-AKM-7 Doc 1 Filed 10/03/23 EOD 10/03/23 17:28:48 Pg 44 of 67 10/03/23 4:14PM Debtor 1 Jayceon Mykell Taylor Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe Flagship Credit Acceptance LLC January, \$2,240.13 \$33,635.18 ■ Mortgage PO Box 2070 February, March Car Coppell, TX 75019-2070 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ■ No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Amount you Reason for this payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **Professional & Business Small Claims** Vanderburgh Superior Pending

Professional & Business
Collections, LLC v. Jayceon M.
Taylor
82D07-2301-SC-000147

Small Claims
Vanderburgh Superior
Court
Court
Courts Bldg, Civic Center
Complex
825 Sycamore Street
Evansville, IN 47708

Filed

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Jayceon Mykell Taylor Debtor 1 Case number (if known) Case title Nature of the case Status of the case Court or agency Case number Med 1 Solutions, LLC v. Janeicia **Small Claims** Vanderburgh Superior Pending **Taylor** Court □ On appeal 82D01-2008-SC-003985 Courts Bldg, Civic Center □ Concluded Complex 825 Sycamore Street Judgment entered 10/30/20 Evansville, IN 47708 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Date Value of the **Describe the Property** property Explain what happened Med 1 Solutions Garnishing 25% of Debtor's disposable 4/7/23 \$734.37 517 US Hwy 31 N income. Greenwood, IN 46142 ☐ Property was repossessed. ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Nο Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name**

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Address (Number, Street, City, State and ZIP Code)

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10/03/23 4:14PM Debtor 1 Case number (if known) Jayceon Mykell Taylor Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Kinkade & Associates, P.C. **Attorney Fees** 3/28/23 \$1,162.00 123 NW 4th Street Suite 201 Evansville, IN 47708-1709 kinkadeassociates@hotmail.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details.

Description and value of the property transferred

Date Transfer was

made

Name of trust

Del	otor 1 Jayceon Mykell Taylor		Case number (if known)					
Par	t 8: List of Certain Financial Accounts, Ir	nstruments, Safe Depo	sit Boxes, and S	torage Unit	ts			
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ☐ No	or other financial acco	ounts; certificate:	s of deposi	•			
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
	Diamond Valley Federal Credit Union 840 Diamond Ave Evansville, IN 47711	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other		6/30/23	\$0.00		
	Diamond Valley Federal Credit Union 840 Diamond Ave Evansville, IN 47711	XXXX-	☐ Checking ■ Savings ☐ Money Ma ☐ Brokerage ☐ Other		6/30/23	\$0.00		
	Cash App 1455 Market Street Suite 600 San Francisco, CA 94103	XXXX-	☐ Checking ☐ Savings ☐ Money Ma ☐ Brokerage ☐ Other On Debit Accord	line	6/30/23	\$0.00		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed t	for bankruptcy, a	ıny safe de _l	posit box or other depo	sitory for securities,		
	No							
	☐ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code)	r, Street, City,	Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit	or place other than yo	our home within 1	1 year befo	re you filed for bankrup	tcy?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Number State and ZIP Code)	r, Street, City,	Describe	the contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Contro	I for Someone Else						
23.			clude any prope	rty you bor	rowed from, are storing	for, or hold in trust		
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pr (Number, Street, City Code)		Describe	the property	Value		

Debtor 1 Jayceon Mykell Taylor

Case number (if known)

Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο ☐ Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27.

Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
☐ A partner in a partnership	☐ A partner in a partnership						
☐ An officer, director, or managing ex	☐ An officer, director, or managing executive of a corporation						
☐ An owner of at least 5% of the votin	ng or equity securities of a corporation						
No. None of the above applies. Go to	Part 12.						
☐ Yes. Check all that apply above and fil	Yes. Check all that apply above and fill in the details below for each business.						
Business Name Address	Employer Identification number Do not include Social Security number or ITIN.						
(Number, Street, City, State and ZIP Code)	·						
	Dates business existed						

Case 23-70730-AKM-7 Doc 1 Filed 10/03/23 EOD 10/03/23 17:28:48 10/03/23 4:14PM Case number (if known) Debtor 1 Jayceon Mykell Taylor 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jayceon Mykell Taylor Signature of Debtor 2 Jayceon Mykell Taylor Signature of Debtor 1 Date October 3, 2023 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

10/03/23	

	mation to identify your case	t .		
Debtor 1	Jayceon Mykell Taylo			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: SC	OUTHERN DISTRIC	CT OF INDIANA	
Case number				
(if known)				Check if this is an amended filing
creditors have you have least You must file th	ever is earlier, unless the co	roperty, or he lease has not e n 30 days after you		
sign a	nd date the form.	•	are equally responsible for supplying corrected	
sign and sig	and date the form. and accurate as possible. If your name and case number our Creditors Who Have Sec	more space is ne (if known). cured Claims	eeded, attach a separate sheet to this form. C	On the top of any additional pages,
sign and sig	and date the form. and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1	more space is ne (if known). cured Claims of Schedule D: Cr	reditors Who Have Claims Secured by Proper	On the top of any additional pages, erty (Official Form 106D), fill in the nat Did you claim the property
sign and sig	and date the form. and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1 elow.	more space is ne (if known). cured Claims of Schedule D: Cr	eeded, attach a separate sheet to this form. C	On the top of any additional pages, erty (Official Form 106D), fill in the
sign and sig	and date the form. and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1 elow.	more space is ne (if known). cured Claims of Schedule D: Cr	reditors Who Have Claims Secured by Proper	On the top of any additional pages, erty (Official Form 106D), fill in the nat Did you claim the property
sign and sig	and date the form. and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1 elow. editor and the property that is	more space is ne (if known). cured Claims of Schedule D: Cr s collateral y	reditors Who Have Claims Secured by Property the secures a debt? Surrender the property. Retain the property and redeem it.	on the top of any additional pages, erty (Official Form 106D), fill in the nat Did you claim the property as exempt on Schedule C?
sign and sig	and date the form. and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1 elow. reditor and the property that is Vestern Funding	more space is ne (if known). cured Claims of Schedule D: Cr	reditors Who Have Claims Secured by Property the secures a debt? Surrender the property. Retain the property and redeem it.	On the top of any additional pages, erty (Official Form 106D), fill in the nat Did you claim the property as exempt on Schedule C?
sign and sig	and accurate as possible. If your name and case number our Creditors Who Have Sectors that you listed in Part 1 elow. editor and the property that is	more space is ne (if known). cured Claims of Schedule D: Cr s collateral s	reditors Who Have Claims Secured by Property the secures a debt? Surrender the property. Retain the property and redeem it.	on the top of any additional pages, erty (Official Form 106D), fill in the nat Did you claim the property as exempt on Schedule C?

Part 2: List Your Unexpired Personal Property Leases

Creditor's World Finance Corp.

Description of Loan secured by TV

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

■ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

name:

property

securing debt:

☐ No

Yes

Case 23-70730-AKM-7 Doc 1 Filed 10/03/23 EOD 10/03/23 17:28:48 Pg 51 of 67

Debtor 1 Jayceon Mykell Taylor				Case number (if known)			
Des	scribe	your unexp	ired personal property leases			Will the lease be assumed?	
Les	sor's n	ame:	AT&T			□ No	
						■ Yes	
	scription perty:	n of leased	Cell Phone Contract (2 years remaining)				
Les	sor's n	ame:	Real Property Management Re	sults		□ No	
						■ Yes	
	scription perty:	n of leased	Rental Lease				
Par	t 3:	Sign Below					
			ury, I declare that I have indicated m ct to an unexpired lease.	y intention about any property	y of my estate that sec	cures a debt and any personal	
X	/s/ Ja	ayceon My	kell Taylor	X			
		ceon Myke ature of Debi		Signature of D	Debtor 2		
	Date	Octob	er 3, 2023	Date			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

10/03/23 4:14PM

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Indiana

In r	e Jayceon Myl	cell Ta	vlor		Case No.		
			,	Debtor(s)	Chapter	7	
				OMPENSATION OF ATTOR		` ,	
1.	compensation paid	to me	within one year befo	cr. P. 2016(b), I certify that I am the attorney ore the filing of the petition in bankruptcy, or emplation of or in connection with the bankr	r agreed to be paid	l to me, for service	
				ıt		1,162.00	
	Prior to the fil	ing of t	this statement I have	received	\$	1,162.00	
	Balance Due				\$	0.00	
2.	The source of the c	ompen	sation paid to me wa	as:			
	Debtor		Other (specify):				
3.	The source of comp	ensati	on to be paid to me i	is:			
	Debtor		Other (specify):				
4.	■ I have not agre	ed to sl	nare the above-disclo	osed compensation with any other person un	lless they are men	nbers and associate	s of my law firm.
				I compensation with a person or persons who of the names of the people sharing in the co			ny law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	b. Preparation and	filing of the o	of any petition, sche debtor at the meeting	and rendering advice to the debtor in detern dules, statement of affairs and plan which m g of creditors and confirmation hearing, and	nay be required;	-	ankruptcy;
6.	Represe	ntatio s, reaf	n of the debtor(s)	sclosed fee does not include the following so in any dischargeability actions, moti ents, relief from stay actions, contest	ons to avoid lie		
				CERTIFICATION			
this	I certify that the for bankruptcy proceed		g is a complete stater	ment of any agreement or arrangement for pa	ayment to me for	representation of th	ne debtor(s) in
	October 3, 2023			/s/ Kevin Kinkade			
Date				Kevin Kinkade 177 Signature of Attorney	33-82		
				Kinkade & Associa	tes, P.C.		
				123 NW 4th Street			
				Suite 201 Evansville, IN 4770	8-1709		
				812-434-4909 Fax:	812-434-4831		
				kinkadeassociates Name of law firm	@notmail.com		

10/03/23 4·14PM

Verification of Creditor List (rev 12/01/18) UNITED STATES BANKRUPTCY COURT

	N DISTRICT OF INDIANA
In re: Jayceon Mykell Taylor) Case No.
dayceon myken rayioi)
Debtor	
VERIFICAT	TION OF CREDITOR LIST
	luded or to be included in Schedules D, E/F, G, and H are listed in the all creditors, parties to leases and executory contracts, and codebtors.
(I/We) declare that the names and addresses of the listed er	ntities are true and correct to the best of (my/our) knowledge.
(I/We) understand that (I/we) must file an amended creditor schedules that are not included in the creditor list submitted	or list and pay an amendment fee if there are entities listed on (my/our) d with this verification.
Dated: October 3, 2023	/s/ Jayceon Mykell Taylor
	Jayceon Mykell Taylor
	Signature of Debtor
	Signature of Joint Debtor

(Note: Certificate of Service not required.)

ADT SECURITY 3190 S VAUGHN WAY STE 150 AURORA, CO 80014

ALPHA RECOVERY CORP. 6912 S QUENTIN ST UNIT 10 CENTENNIAL, CO 80112

AMERICAN PROFIT RECOVERY 34505 W 12 MILE RD STE 333 FARMINGTON HILLS, MI 48331

AMERICOLLECT, INC. PO BOX 1566 MANITOWOC, WI 54221-1566

AT&T
ATTN: BANKRUPTCY DEPT.
2612 N ROAN ST
JOHNSON CITY, TN 37601-1708

BISON GREEN PO BOX 528 HAYS, MT 59527

BOSTON IVF AT THE WOMEN'S HOSPITAL PO BOX 963 EVANSVILLE, IN 47706

BRIGHT LENDING PO BOX 578 HAYS, MT 59527

BRITTANY SHELTON 10315 PETERSBURG ROAD EVANSVILLE, IN 47725

BUSINESS REVENUE SYSTEMS, INC. DES MOINES IA DIVISION 6032 TRIER ROAD FORT WAYNE, IN 46815

CAINE & WEINER 12005 FORD RD DALLAS, TX 75234

CAPITAL ONE ATTN: BANKRUPTCY DEPT. PO BOX 30285 SALT LAKE CITY, UT 84130

CAPITAL ONE BANK USA NA 15075 CAPITAL ONE DRIVE 2ND FLOOR RICHMOND, VA 23238

CASH ADVANCE INC C/O CHARLIE FAGAN 915 ARROW HWY GLENDORA, CA 91740 CASH PRO 101 PLAZA EAST BLVD STE 100 EVANSVILLE, IN 47715

CHECK INTO CASH CORPORATE PO BOX 550 DUBLIN, OH 43017

CHECK INTO CASH- DIAMOND AVENUE 630 E. DIAMOND AVENUE EVANSVILLE, IN 47711

CHRISTINA HANNA ESQ 517 US HIGHWAY 31 N GREENWOOD, IN 46142

COLLECTION ASSOCIATES NDBA RMP PO BOX 630844 CINCINNATI, OH 45263-0844

COMPLETE BILLING SERVICES 517 US HWY 31 NORTH GREENWOOD, IN 46142

CREDIT COLLECTION SERVICE 725 CANTON ST STE 1 NORWOOD, MA 02062

DEACONESS HEALTH SYSTEM/HEALTHCARE RESOURCE SOLUTIONS, LLC PO BOX 1230 EVANSVILLE, IN 47706-1230

DEACONESS HOSPITAL PO BOX 152 EVANSVILLE, IN 47701-0152

DEACONESS HOSPITAL PO BOX 152 EVANSVILLE, IN 47701-0152

DEACONESS HOSPITAL PO BOX 152 EVANSVILLE, IN 47701-0152

DEACONESS SINGLE BILLING DEACONESS SINGLE BILLING (EPIC) PO BOX 1230 EVANSVILLE, IN 47706

DIAMOND VALLEY FEDERAL CREDIT UNION 840 DIAMOND AVE EVANSVILLE, IN 47711

ECHO COMMUNITY HEALTH CARE INC. 315 MULBERRY STREET EVANSVILLE, IN 47713

EPI FINANCE GROUP, LLC 517 US HIGHWAY 31 N GREENWOOD, IN 46142-3932

EVANSVILLE PSYCHIATRIC ASSOCIATES 2015 MAXWELL AVENUE EVANSVILLE, IN 47711

EVANSVILLE RADIOLOGY PC 350 W COLUMBIA ST STE 420 EVANSVILLE, IN 47710

FINWISE/OPPLOANS
130 E RANDOLPH ST STE 3400
CHICAGO, IL 60601

FLAGSHIP CREDIT ACCEPTANCE LLC PO BOX 2070 COPPELL, TX 75019-2070

FORTIVA CREDIT CARD PO BOX 105341 ATLANTA, GA 30348

GALAXY INTERNATIONAL PURCHASING LLC 4730 S FORT APACHE ROAD SUITE 300 LAS VEGAS, NV 89147

HOOSIER ACCOUNTS SERVICE 2545 MJM INDUSTRIAL DR EVANSVILLE, IN 47715

HOOSIER ACCOUNTS SERVICE 2545 MJM INDUSTRIAL DR EVANSVILLE, IN 47715

INDIANA DEPARTMENT OF REVENUE BANKRUPTCY SECTION 100 SENATE AVE ROOM N240 INDIANAPOLIS, IN 46204-2217

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101-7346

IVY TECH COMMUNITY COLLEGE 3501 N 1ST AVE EVANSVILLE, IN 47710

KAHN, DEES, DONOVAN & KAHN PO BOX 3646 EVANSVILLE, IN 47735-3646

MED 1 SOLUTIONS 517 US HWY 31 N GREENWOOD, IN 46142 MED 1 SOLUTIONS 517 US HWY 31 N GREENWOOD, IN 46142

MEDICAL & PROFESSIONAL COLLECTION SVC. 5055 NEWBURGH PLAZA SOUTH NEWBURGH, IN 47630

MEDICAL & PROFESSIONAL COLLECTION SVC. 5055 NEWBURGH PLAZA SOUTH NEWBURGH, IN 47630

MINUTECLINIC DIAGNOSTC OF INDIANA PO BOX 329 WOONSOCKET, RI 02895-0781

NET CREDIT 175 W JACKSON BLVD STE 1000 CHICAGO, IL 60604

OFFICE OF THE UNITED STATES ATTORNEY SOUTHERN DISTRICT OF INDIANA 10 WEST MARKET STREET, STE 2100 INDIANAPOLIS, IN 46204

OWENSBORO HEALTH BILLING PO BOX 20007 OWENSBORO, KY 42304

PORTFOLIO RECOVERY ASSOCIATES, LLC 120 CORPORATE BLVD STE 100 NORFOLK, VA 23502

PROFESSIONAL & BUSINESS COLLECTIONS INC. KAHN DEES DONOVAN KAHN 501 MAIN STREET SUITE 305 EVANSVILLE, IN 47708

PROGRESSIVE PALOVERDE INSURANCE CO PROCESSING CENTER - 27 PO BOX 55126 BOSTON, MA 02205

REAL PROPERTY MANAGEMENT RESULTS 1322 E DIVISION ST EVANSVILLE, IN 47711

REPUBLIC BANK C/O EPI FINANCE GROUP 517 US HIGHWAY 31 NORTH GREENWOOD, IN 46142

REPUBLIC BANK & TRUST CO. PO BOX 950276 LOUISVILLE, KY 40295-0276

REV 1 SOLUTIONS 517 US HWY 31 N GREENWOOD, IN 46142 SOUTHWEST INDIANA PATHOLOGIST LLC PO BOX 3078 EVANSVILLE, IN 47701

TATE & KIRLIN 580 MIDDLETOWN BLVD SUITE D240 LANGHORNE, PA 19047

THE BANK OF MISSOURI PO BOX 105555 ATLANTA, GA 30348

TRANSWORLD SYSTEMS INC FDBA NCO FINANCIAL SYSTEMS INC 500 VIRGINIA DRIVE FORT WASHINGTON, PA 19034

TRI-STATE ORTHOPAEDICS, INC. 225 CROSSLAKE DRIVE EVANSVILLE, IN 47715

US DEPT. OF JUSTICE/US ATTORNEY GENERAL 950 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20530-0001

WESTERN FUNDING 3915 E PATRICK LANE LAS VEGA, NV 89120 WESTLAKE FINANCIAL SERVICES 4751 WILSHIRE BLVD STE 100 LOS ANGELES, CA 90010

WGLS 10600 S PENNSYLVANIA AVE STE 16#828 OKLAHOMA CITY, OK 73170

WLCC GREEN CIRCLE PO BOX 75 PINE RIDGE, SD 57770

WORLD FINANCE CORP. C/O WORLD ACCEPTANCE CORP. 4313 E MORGAN AVE STE D EVANSVILLE, IN 47715

WORLD FINANCE CORPORATION C/O WORLD ACCEPTANCE CORP. PO BOX 6429 GREENVILLE, SC 29606-6429